

Implementation of PEPFAR (SA)



NOBAYENI C. DLADLA
Health Attaché
Embassy of South Africa



Comprehensive HIV and AIDS Care, Management and Treatment Program

- The implementation of the Comprehensive Plan started in the first quarter of 2004
- Pre-implementation activities included:
 - readiness assessment of service points;
 - training;
 - development of national treatment guidelines,
 - advertisements for recruitment drive of required personnel;
 - nutrition and drug procurement and
 - consultations and development of patient forms



Comprehensive HIV and AIDS Care, Management and Treatment Program

- Capacity building and training of health professionals is on-going
- Posts are being advertised but the response is low.
- Major challenge in the distribution of human resources
- The Department of Health has introduced incentives to attract health workers in rural areas
- The National Health Laboratory Services is providing efficient laboratory services, while also working on improving capacity
- Monitoring and Evaluation Framework has been developed



Comprehensive HIV and AIDS Care, Management and Treatment Program

- Patient forms have been developed and distributed to all provinces.
- The development of patient information system is underway.
- Provinces are at varying stages of implementation.
- Gauteng and the Western Cape have reached more people during this period.
- KwaZulu Natal is increasing the number of in-takes while other provinces are struggling in meeting targets.
- 23000 people are on treatment (target by end 2005 is 53000)



Background on PEPFAR in SA

- 14 October 2003, Minister of Health and Ambassador Tobias met in South Africa.
- This was the first official briefing on the PEPFAR to the South African government
- A Joint Statement was issued following this meeting. This formed the basis of cooperation on PEPFAR
- A Joint Consultation Committee was formed chaired by the Department of Health
- The Joint Consultation Committee meets on a regular basis for consultations.



Key Issues on the Joint Statement

- Both sides agreed to utilize the funds to support SA HIV and AIDS strategic framework and Comprehensive Plan
- Minister identified a few possible areas of support such as:
 - ✓ Strengthening health care system
 - ✓ Integrating HIV into the current health services
 - ✓ Addressing issues of stigma and discrimination



Composition and function of the Joint SA/US Consultation Committee

- Committee chaired by the national Department of Health
- It has representation from the Departments of Social Development, Correctional Services and Defense
- Review proposals and make recommendations for consideration by Washington Office
- The Washington office makes final decisions on proposals
- The US Embassy in South Africa informs the Joint Consultation Committee on decisions in regard to approved proposals.



Process for PEPFAR review proposal in South Africa

- 100 NGOs submitted proposals for 31 December 2003 deadline; Department of Health was among institutions that submitted proposals.
- The Department of Health proposals were rejected
- Departments of Social Development and correctional Services were funded
- Of the 100 NGOs, 36 were requested to submit full proposals by end of February 2004, and 13 were recommended for funding
- Multi-country track managed in Washington DC, the Department is aware of the South African National Blood Service as institution funded



Challenges

- Observation made by the Department is that the majority of funded NGOs or institutions are US service organizations
- The only mechanism available is for international NGOs/institutions to find local partners
- The multi-country track does not seem to have in place a strategy to identify and utilize South African institutions with a support role of international institutions in areas that require support



Key Questions to Reflect On

- ❖ What framework exists to facilitate that the multi-partners used in service delivery are not using own priorities, but support the national response?
- ❖ Where do we rank national priorities in relation to PEPFAR priorities?
- ❖ What plans are in place to ensure that South African institutions are provided with adequate capacity and support for sustainability?
- ❖ Is the current structure the best to support the effective fight on HIV and AIDS, using a local response?